

CONSIDERATIONS ABOUT THE IMPACT OF PERMACRISIS ON PEOPLE LIVING IN ROMANIA

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Abstract: The current global context, characterized by the Covid 19 pandemic, wars in various parts of the world, the closest of which is in the proximity of our country (neighbouring Ukraine), the growing energy crisis and the imminence of a global economic one, significantly impacts the way each person manages daily activity in terms of emotions and behaviour, resorting to their own coping mechanisms. The present analysis expresses some considerations regarding the management of the current psycho-traumatic events by Romanian people, and some possible explanations, based on day to day observations and current reflections in the media.

Keywords: Covid 19, pandemic, permacrisis, personality traits, post – traumatic stress, readjustment, vaccination, war

Humanity is currently living through complicated, tough times for which none of us is fully prepared. On the 11th March 2020, the World Health Organisation has declared the Coronavirus outbreak a global pandemic (WHO Director-General's opening remarks at the media briefing on COVID19 - March 2020). We have experienced this planetary event as a crisis that has affected all aspects of life: medical, psychological, economic, social, political, spiritual, cultural, human. Recently, the World Health Organization declared the pandemic over, but general confidence in the authorities has been ruined by the evolution of the medical phenomenon and the uncertain results of the vaccination campaigns.

"Excess mortality" is a term used in epidemiology and public health, illustrating the number of deaths from all causes during a crisis, which is higher than would be expected under "normal" conditions. Officially reported European excess mortality showed enormous values of around 40% in November 2020 and 26.5% in November 2021 (https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Main_Page). In Romania, the excess mortality for November 2021 was 111% (<https://monitorsocial.ro/indicator/excedentul-de-mortalitate-covid-19-in-romania/>). In our country, most of the population remained reluctant to be vaccinated, fearing its harmful effects rather than the imminent risk of an unpredictable and potentially lethal disease. The number of illnesses empirically attributed to vaccination has yet to be estimated. As a particular psychological trait, Romanians seem to believe that vaccination is more deadly than the disease itself.

As if this trauma was not enough, the threat of war in the proximity looms over us all; we are overwhelmed by many debates, opinions, statements by officials, economic crisis, difficulties of daily life and, among all this, the need to carry on with what we usually do: be ourselves, learn a profession, take care of our families, earn a living, etc. So do we carry on

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with our lives, in an increasingly uncertain international context, despite the risk of war spreading?

The Russian – Ukrainian conflict has led to the highest migration rate in Europe since the 2nd World War (Moraru *et al.*, 2022), so the population exodus from the directly affected areas, the abundance of horrifying media news, the rising inflation, the threat of a cold winter has become daily anxious factors, which outline a new and hard to manage reality, now, when we still haven't recovered from the aftermath of the Covid 19 pandemic.

We could say that we are in the middle of a global crisis (health threats, war, extreme climate change); it may fundamentally threaten our survival, paradoxically, in an era of cutting- edge technologies and unprecedented societal development. The Collins Dictionary nominated the term "permacrisis" as the the word of the year 2022, designating "an extended period of instability and insecurity, especially one resulting from a series of catastrophic events" (<https://www.collinsdictionary.com/dictionary/english/permacrisis>). As the author David Shariatmadari notes in a blog post published on November 1st, it is "a term that perfectly embodies the dizzying sense of lurching from one unprecedented event to another, as we wonder bleakly what new horrors might be around the corner". (<https://blog.collinsdictionary.com/language-lovers/a-year-of-permacrisis/>).

Without lobbying for conspiracy theories, we note however that the ability of policy makers to control the global crisis is low, despite technological development and huge advances in science. As a result, individuals can feel lonely facing life's diverse challenges. The health crisis has been characterised by: global scale, long duration, rapid succession and increasing severity of disease waves, unpredictability. The healthcare system itself has undergone an entire reorganisation process in the need to find therapeutic solutions for people (Scalia *et al.*, 2022). New medication and vaccines were created and implemented in a fast pace, but the long-term effects of the disease and of vaccination are still difficult to measure and require extensive analysis (Herța *et al.*, 2021).

Without an intermezzo for finding a new provisional equilibrium, however, the stress of war in the neighbouring areas has been superimposed. The information broadcast on all media channels about large-scale aggression, unimaginable only a few months before, the loss of human lives, material destruction, the exodus of refugees, environmental pollution, the spectre of radioactivity, even mass extinction, configures the seemingly surreal atmosphere of a horror film in which we have been living for several months now.

Armed conflicts also represent, just as much as a pandemic, public health emergencies and affect human lives on multiple levels. War media creates feelings of insecurity, anxiety, panic and distress (Nechita *et al.*, 2022).

If during the pandemic period we faced forced isolation, changes in our daily routines, unexpected changes at school or at work, perhaps even the loss of a job, limited access to public services, education and healthcare, we are now experiencing another new form of complex and persistent stress that has changed our lives forever. If the pandemic was similar to a war, in terms of obvious individual and collective security threats, we are now witnessing the threat of a real war. Both situations traumatise the psyche through the diffuse and uncertainly avoidable threat of death. Of course, this double "war" (post pandemic status and border armed conflict) is still hidden from the view of those who do not want to see it, although it leads to different behaviours in our society: passionate attitudes and reactions, sometimes indifference or violent denial. However, it has certainly polarised Romanian society from the perspective of global and individual disaster management, through the catastrophic dimensions of the objective consequences generated.

Exposure to the general pandemic context, and more recently the threat of war cause, for many of us, significant psychological consequences. People with preexisting mental disorders, in particular, may suffer more serious decompensations and developments, with a poor, incomplete therapeutic response. People with risk factors for psychoaffective imbalance may experience depression, anxiety, develop various toxic addictions etc. Romanian people have experienced limitations in access to medical care, for the ones suffering of other diseases than Covid 19. Up until some months ago, a serious psychotraumatic factor was being isolated when ill, being separated from loved ones, or the impossibility of caring for the loved ones who became ill. The forced isolation of terminally ill people created lasting psychotrauma for the remaining families. Therefore, many people developed post-traumatic stress disorder. Nowadays, the uncertainty of existence and the unpredictability of tomorrow bring hypersensitive personalities, but also the most balanced ones, according to each one's personality traits, to the brink of anguish, maladjustment and catastrophic reactivity (Checchi and Roberts, 2005).

Catastrophe, in the sense of a "disruption of the order of things, hitherto perceived as continuous and coherent", affects both the active population and the elderly, who are more exposed to difficulties of all kinds. From a psychological point of view, the emotions and feelings associated with disaster, as Doron and Parot also said back in 2006, are "anguish, panic, guilt, bewilderment". This severely limits the general capacity to adapt and, more broadly, to survive. The individual's adaptation to the current uncertain and unpredictable quasi-chaotic situation would be the key rational element in resolving the crises we are experiencing. But adaptation is neither easy nor within everyone's reach. The loneliness of the "long-distance runner" (i.e. the individual in the course of his or her own existence) needs to be alleviated through correct information, education, psychological training, medical assistance when needed, i.e. through everything that would be required in a time of crisis, and last but not least, through solidarity.

The process of adaptation, of "voluntary or involuntary change" for the purposes of survival, has several meanings: evolutionary, physiological, sensory, learning. Adaptation involves achieving a new equilibrium, compatible with survival, and is a psychobiological necessity (Doron and Parot, 2006). In the final analysis, it is all about the survival not only of the individual, but of the community, even of the human species. Biologically, adaptation results from the optimal functioning of the nervous, endocrine and immune systems. But in today's context, adaptation involves many more conditionalities, involving extrapersonal factors - political, social, medical, spiritual.

A lucid analysis of the crisis situation, the formulation of key, urgent problems to be solved, the identification of realistic options, the drawing up of an action plan in line with existing means, the preparation of the necessary elements to bring it to fruition, would be just a few elementary directions through which "poor man under the helm of times" (Miron Costin), would take the first steps towards adaptation.

For many, anchoring in the beliefs of the elders, traditions and superstitions are a real coping mechanism in the emotional turmoil of the period we are going through. Thus superstition, as "an unfounded belief about the nature or cause of a phenomenon, generating individual or social behaviour attesting to this belief" (Doron and Parot, 2006) is an anchor, an escape of a primitive nature, which limits rationality and free will.

It can easily be correlated with fear of an overwhelming aspect over which the individual has no control. We can suspect that the irrational, pathological fear of vaccination

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during the recent Covid 19 pandemic in some of our fellow citizens, was induced by disinformation, indoctrination or insufficient documentation.

In the psychological sense, pathological fear is abnormally triggered by levels of danger that are too low to be harmful, but which are frequently activated. This leads to maladaptive behaviour, in the case under consideration, to the refusal of vaccination, even with the risk of a severe, potentially fatal evolution in the event of illness (Andre, 2019). According to the World Health Organisation, vaccine hesitancy is one of the top threats to global health (Report of the SAGE Working Group on Vaccine Hesitancy, cited by Rajan and Hou, 2022). Thus, through sustained disinformation campaigns, the pathological fear response has been systematically reinforced, to which the individual responds by denying the truth of science, at the cost of his or her health, or even their life. Even for survivors of the pandemic, a true post-traumatic stress syndrome is expected to develop, with significant impact on the quality of life.

Analysis of the psychotrauma of the Covid 19 pandemic reveals a complex constellation made up of: the psychological trauma of the event itself, constituting a real danger to the life or integrity of the person, the subjective experience of the event, with intrusive reliving of the memory of the event, the presence of triggering stimuli for the memories and the related anxiety, the effects of the lived experience through the individual, physical, psychological and social consequences, which are unpredictable and which will be integrated into a pattern of readjustment to life after the traumatic event, i.e. the subsequent evolution. This is a lifelong process and is dependent on the subjective experience and support available to the affected person (Herța *et al.*, 2021).

The current state of war threat brings new levels of psychological distress. It is well known that the main symptoms of post-traumatic stress are due to changes in the physiology of the amygdala nucleus. In the locus coeruleus, adrenaline and noradrenaline are responsible for giving "special force to traumatic memories". In post-traumatic stress disorder, high doses of catecholamines and ACTH are secreted as an exaggerated response to situations that are minimally dangerous but reminiscent of the original trauma. Significant changes have also been identified in endorphin secretion, all of which are difficult to rebalance afterwards. A phenomenon of "fear conditioning" occurs. Patients with post-traumatic stress disorder feel insecure, a feeling that goes beyond certain identifiable dangers. Post-traumatic stress disorder has a "hyper-sensory, hipo-cognitive" basis (Van De Mortel *et al.*, 2022). Anxiety stems from feeling "out of control of what is happening to their body and emotions" (Goleman, 2008).

Long-term stress causes biological alterations in brain structures, whether the psycho-traumatic event has already consumed itself or is still ongoing. However, post-traumatic stress disorder, as a socially widespread phenomenon, also concerns witnesses who are not directly involved in traumatic events (pandemics, war), but who are likely to develop behaviours such as "irritability, angry outbursts, self-destructiveness, hypervigilance, exaggerated twitching, difficulty concentrating, sleep disturbances" (International Classification of Diseases, 10th Revision, 1998). People suffering from post-traumatic stress disorder are also vulnerable to developing comorbidities such as alcohol use disorder, major depressive disorder and even suicidal ideation (Van De Mortel *et al.*, 2022).

In an extensive study on the psychology of the Romanian people, Daniel David identified "conformism, religiosity, social cynicism, skepticism" as statistically significant traits. They are complemented by "lower levels of pragmatism, trust in people, benevolence, self-determination" (David, 2015), and a "tendency towards bipolarity (division into camps with antagonistic inclinations)". The cited study also mentions: "collectivist, gregarious

culture”, herding and ”hierarchically concentrated power”. It is perhaps because of this particular psychological configuration that our fellow citizens are always looking to others for solutions, and are less and less involved in solving today's pressing problems. Hence, with some notable exceptions, the low level of social solidarity and therefore the loneliness of the individual in the face of major decisions.

Let us add to this analysis the much publicized lack of trust of Romanians in scientific authority, devotion to superstitions, sometimes bigotry, delegation of individual responsibility to the Divinity, from whom it is enough to ask something, to ”pray” and there is no need for any other active involvement to solve one's problems. As the study shows, Romanians cultivate ”heterodetermination (by tradition, religion), to the detriment of self-determination (autonomy in decision-making)” (David, 2015).

Is it possible that the solution to get out of this real ”psychosocial blockage” (<https://www.youtube.com/watch?v=MT79jifegBoc>), the lack of adequate reaction to the current crisis situations, would lie in the consistent practice of empathy? Thus, the ”talent of knowing what others feel” (Goleman, 2008), the willingness to position oneself ”in the other's shoes” for understanding their point of view, their fear, revolt, opposition, even their despair, might be the answer? So, not necessarily adopting the other person's point of view, but at least understanding the psychological factors that drive their behaviour and accepting them. The Covid 19 pandemic seems to have divided us, into two hostile and equally bitter camps. The security crisis we are now experiencing, with no respite from the pandemic, finds us equally divided. Spurred by excess death or mass emigration, it is easy to forget that we are part of the same people and that we share a common historical destiny. The bipolarity with which we have been described, segregationism, makes it difficult to find appropriate solutions to the problems that history confronts us with against our will. Above and beyond science, faith or other foundations of our actions, it is important to bear in mind that the individual good is only an illusion in the absence of a general, societal good. It is difficult, if not impossible, to thrive as individuals in a disunited, conflicted, ignorant and increasingly disoriented society.

Beyond the immediate, somewhat discouraging prospects, there remains the dilemma of the medium- and long-term development of the collective mind, of the possibilities of evolving as individuals in a society on the periphery of developed Europe, which we do not seem to understand sufficiently, but perhaps does not understand us either.

And if ”in religion society sacralizes itself”, as Emile Durkheim used to consider (Durkheim, 1995), with concern about Romanian society today, I paraphrase the well-known writer Henryk Sienkiewicz, and ask: ”Quo vadis homine?”

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